

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

12 CV 7516

Marion Francis 66174-054

Orlita Garret 67913-054

ADA Regina Lewis 67206-054

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

The United States of America

FBOP

Federal Bureau of Prisons

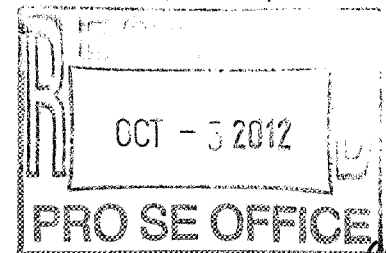
COMPLAINT

under the

Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)

Jury Trial: ☒ Yes ☐ No

(check one)



(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Regina Lewis ADA Plaintiff

ID #

67206-054

Current Institution

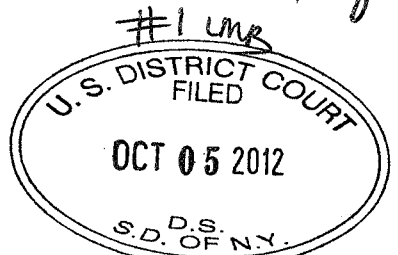
MDC

Address

PO Box 329002

Brooklyn, NY 11232

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.



Defendant No. 1 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Defendant No. 2 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Defendant No. 3 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Defendant No. 4 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Defendant No. 5 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur? Metropolitan  
Correctional Center

B. Where in the institution did the events giving rise to your claim(s) occur? the unit

C. What date and approximate time did the events giving rise to your claim(s) occur? July 26,  
2012, August 23, 2012

D. Facts: on July 26, 2012 I was housed with a male inmate.

He made me uncomfortable as he engaged in staring, leaning over my shoulder to see what I'm writing, taking my seat when I got up. He was also provided with very large needles to inject himself with hormones three times a day. I complained in cop out to the case manager about fear of being purposely or accidentally stabbed as he passed by me with the syringes in the common area. The male inmate was stalking me.

On August 23, 2012 inmate Daniell Williams asked to be a part of the lawsuit, told staff members I was circulating a petition with other females. The Lt. instructed her to get a copy. I did not start a petition I filed a complaint with the court. Because no petition was produced by their #1 snitch and no one owned up to it in retaliation I was indicted and remain in MCC. Every staff member referred to the male inmate as a female and said he cut off his penis end of story. ~~But~~ I was chastised and threatened by other inmates, Laura Oiler who kept walking on my heels and antagonizing me.

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

retaliation and indicted on the same day I put out of MCC. Mr. Holt told me just before that I was going home. Ms. Eldridge told another inmate that my case wasn't real I was only here for a psych eval. I am the victim of prosecutorial misconduct. According to the MCC Manual line 6 page 23 I have a right to unrestricted and confidential access to the courts by correspondence on matters such as the legality of my conviction, civil matters, pending criminal cases, and conditions of my imprisonment. See Attachment

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

attachment mdc manual

### III Injuries

pg 23 line 6 on the left of the mdc manual

I have the ~~right~~ responsibility to  
present honestly and fairly my petitions,  
questions, and problems to the Court

The exact same is true in the  
MCC manual as well

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Metropolitan Correctional Center

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ☐ No ☐ Do Not Know ☒

If YES, which claim(s)? \_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ☒ No ☐

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ☐ No ☐

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

With case manager Eldridge

1. Which claim(s) in this complaint did you grieve? VOYEURISM,

harassment, fear of being stabbed by needles.

2. What was the result, if any? retaliation, transfer to another

facility, told other inmates I am crazy, violated HIPAA, indicted

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

filed multiple reports, relayed my fear and  
frustration to Mr. Huls brother, etc.

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: \_\_\_\_\_

2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any: \_\_\_\_\_

Ms. Eldridge, Ms. Hill's brother, other  
officers

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. \_\_\_\_\_

I was questioned by sis as part of an  
investigation and intimidated and accused of  
circulating a petition

**Note:** You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

**V. Relief:**

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). \_\_\_\_\_

Damages for everyday I was in the  
presence of this man who suffers for Gender  
Identity Disorder and who is not here will  
ever be a woman. Medical Science to my knowledge  
has never and will never create a woman.

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes \_\_\_ No X

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff NA

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_ No \_\_\_

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes X No \_\_\_

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Regina Lewis

Defendants USA, EBOP, Warden, AW, U.S. Marshal Eric Weiss, Doyle Murphy, Times Herald Record

2. Court (if federal court, name the district; if state court, name the county) Southern District / Carolyn Stubbs

3. Docket or Index number Pending / approval

4. Name of Judge assigned to your case None

5. Approximate date of filing lawsuit Sept. 2012

6. Is the case still pending? Yes NA No NA

If NO, give the approximate date of disposition NA

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) NA pending approval

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 12 day of October, 2012

Signature of Plaintiff

Inmate Number

Institution Address

Rogina Lewis  
67206-054  
MDC  
PO Box 329002  
Brooklyn, NY 11232

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 12 day of October, 2012, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Rogina Lewis



In the United States District Court  
For the Southern District of New York

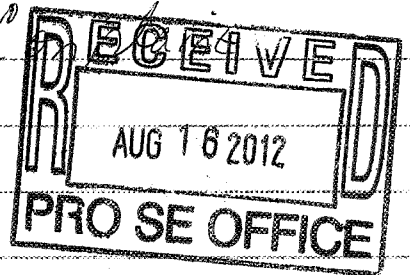
Marion Francis 66174-054

Anita Harret 67193-054

Regina Lewis 67206-054

-v-

The United States of America  
Federal Bureau of Prisons  
defendant's



We the plaintiffs are currently  
incarcerated in the Metropolitan Correctional  
Center and do file this complaint against the  
defendants for constitutional violations.

We are being forced to share both  
living areas and common areas with a  
male inmate.

Marion Francis ~~shared~~ shared a  
cell with a male inmate for two months  
where she shared open bathroom facilities  
and bathing area and slept five feet  
away from him.

Francis also fears for her life  
because she has been threatened and  
intimidated on more than one occasion  
by the male inmate who did threaten to  
cause her serious bodily harm for her  
complaints

all plaintiffs have been subjected to ~~the~~<sup>the</sup> delusions of grandeur of the male inmate who describes in detail his experience with childbirth.

Details include giving birth through normal delivery to a ten pound baby girl, breast feeding and having a normal ~~delivery~~ menstruation thereafter.

The male inmate is also provided with feminine hygiene products including sanitary napkins.

The male inmate also has regular gynecological visits with the facility gynecologist.

All plaintiffs find this arrangement to be disturbing and humiliating.

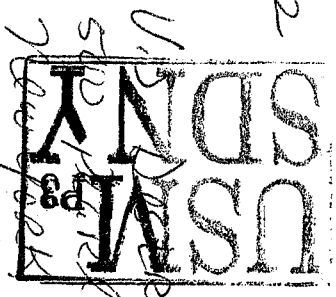
This complaint is filed under the High Category Code Prohibited Acts under Sections 301, 303, 307, 328, 399 and Moderate Category Code Prohibited Acts under Sections 300, 313 in the Manual for Pre-Kreal inmates.

all plaintiffs have witnessed  
illegal prescription drug activity that  
we find to be in violation of the  
High Category Code Prohibited Acts  
under Section 299 in the Manual  
for Pretrial Inmates.

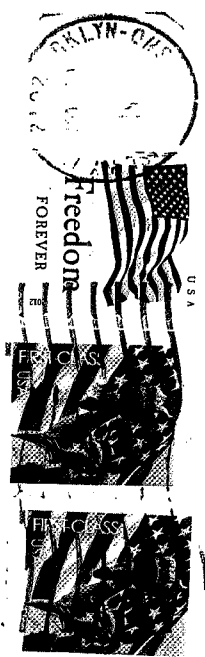
Marion Francis 8-9-12  
Crista Smith 8/9/12  
Regina Lewis 8-9-12

Requie fees 67206-054  
mxc  
PO Box 329002  
Brooklyn, NY 11232

Legal mail



U.S. District Court  
500 Pearl St.  
New York, NY 10007



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